

SERIAL NUMBER: 09 / 807628 RECEIPT DATE: 04 / 16 / 01 IA NUMBER: PCT/ GB99 / 03322 IA FILING DATE: 10 / 15 / 99 **HUN7** FAMILY NAME: DELAY WAIVED (Y/N): Υ MELVYN JOHN GIVEN NAME: DEMAND RECEIVED (Y/N): Υ PRIORITY CLAIMED (Y/N): PRIORITY DATE: 10 / 16 / Υ 98 NO BASIC FEE (Y/N): US DESIGNATED ONLY (Y/N): N ATTORNEY DOCKET NUMBER: WN/LM/DRA.3. COUNTRY: CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000466 TELEPHONE 7035212297 FAX

NAME: YOUNG & THOMPSON

STREET: 745 SOUTH 23RD STREET 2ND FLOOR

CITY: ARLINGTON

STATE/COUNTRY: VA ZIP: 22202

EMAIL:

APPLICATION TITLES: SPEECH PROCESSING

TAB TO LAST POSITION, PUSH SEND